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# Brain Candy: Wayne State University School of Medicine Journal of Arts and Culture, Fall 2017 Edition

Wayne State University School of Medicine Writing Workshop

Wayne State University School of Medicine Gold Humanism Honor Society

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# Brain Candy

**A Wayne State University School of Medicine Arts Journal  
Presented by the Gold Humanism Honor Society**

**Fall, 2017 Edition**

**Editorial Board:**

Sakeena Fatima  
Saara Mohammed  
Moaz Sinan  
Kristy Abraham  
Brian Krasnick



**From the Editors,**

**Dear Reader,**

**We are delighted to bring you this edition of Brain Candy, the Wayne State University School of Medicine Journal, sponsored by the Gold Humanism Honor Society. As always, the mission of this journal is to highlight the creative vision and voices of our students, physicians, and all medical personnel.**

**Compiling this issue was a rigorous process that involved soliciting, reading, and editing various submissions - but also a very rewarding one. This journal serves as a testament to the talents of the people within the Wayne State School of Medicine body. We hope this finished copy serves as a thought-provoking and inspiring read - just as it did for us. We hope to always continue this celebration of humanism, art, and creativity within medicine.**

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Sunil Jaiman

### **The Call to Help...**

Lisa MacLean, M.D.

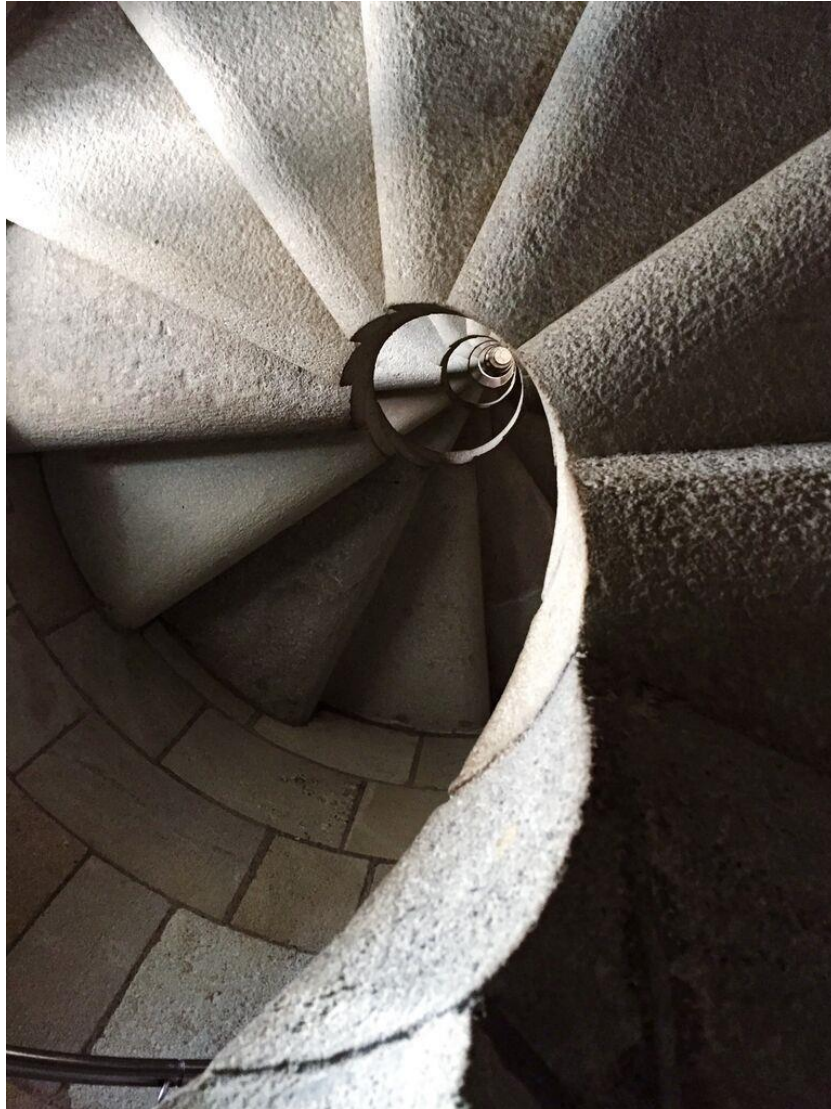
I don't remember a time when I did not feel called to help. As a young girl growing up in a traditionally Sicilian family, it was expected that I would help. Help clean the house, help clear the dishes, help with yard work. As I developed into a young woman, this act of helping didn't diminish. Suddenly, I found myself helping with student government projects, helping solve my friend's problems, helping a sick neighbor or relative. It didn't surprise anyone in my family when I said I wanted to become a physician. It seemed a natural fit: who better to help than a physician.

The path to become a physician was a tough one. I found myself so busy helping myself that I didn't have much time to help others. I felt like a piece of me was lost in the process especially during the first two years of medical school. As I transitioned into third year, I was invigorated by the clinical experiences. Suddenly, I was back doing what I felt called to do: Helping. Helping someone to the restroom, helping the team pull up a lab, helping to give bad news. The act of helping was just what I needed to get me through. Discovering psychiatry was an unexpected bonus of my third year. Now I could really help. I could help the broken and the discarded, the sad and fractured. There can be no greater calling than to truly help a broken person heal.

During my private practice years, I lived and worked in the same community. No matter where you live, there is brokenness. Though I was busy providing all levels of care, I knew I was truly helping

and this brought me great satisfaction. It was difficult when I felt helpless to help which, unfortunately, in medicine sometimes happens. When I was approached to return to become the psychiatry residency program director, it was my calling to help that guided me to accept the offer. Now I could help my patients and the patients of my residents. For me, a person filled with so much to love and desire to help, I could think of no better path. When I moved from residency program director to Assistant Dean of Students, my net expanded. Now, I was helping more people. To guide a developing professional to become their very best is truly an honor. By helping students, perhaps I was also helping their future patients. I hoped that, in my small way, I could help more people and I could fulfill my calling to help.

So, in the end, what I don't think I fully realized when I began this journey as a young girl is how much helping others would bring fulfillment to my own life. All along, the goal had been to help others. But, in doing so, it brought so much to my own life. I hope that you, also, will fulfill your call to help and, in turn, find your own personal reward. I want to thank you all for letting me help you and for helping me to try to be my best version of myself. It's been one of my greatest honors and privileges to help you with your professional development and, in turn, hopefully, to help those you will later serve. I guess, ultimately, we all just want to make some small impact on the world. I hope you can now carry the torch forward and you, too, can be called to help so that you can also make your impact on the world.



"Descent" by Madeline Berschback

**Magnum Opus**

Abid Ahmad

How lucky we are

For our school books are living

Their ink crimson red

**Medical Student's Epiphany**

Rachelle Moore

I found myself on

the wrong side of the gurney:

Learned about patie(nts)ncc.



"Matthew" by Sharon Bratcher



## A Hug

Radhika Rastogi

A hug is like a set of chains

Two arms wrap around like iron bars

The body enclosed, another restrains

Any attempts to escape for the stars.

But it is grounding to be held.

To hold you down and meld

Into one being, shared emotions and pain

With nothing to do or even to gain

Yet submitting to such hold

To not even try to escape

But bind each other together

As if with duct tape

Then you are united

And united you cannot fall

You are held up on the ground

And together you stand tall.

## **Broken Down**

Plesia Wiggins

I stood there staring into space; tears streaming down my face. My heart seemed as if it wouldn't beat. My legs got weak; they shook; they stumbled; I fell. I fell to my knees. The pain was strong; and the floor was hard. There I was trembling; and crying. All I could think was Lord please help me. Then the words escaped my lips "Gracious and kind heavenly Father, God, please help me; please help me now. I need you at this time; at this moment. I feel as if I'm not going to make it. I feel as if my world is crumbling down all around me." The words flowed from my mouth as if I were not crying terribly. There was a pain in my chest along with stuck tears. I continued to pray. "Father; God, I know that you hear me and I know that your will is going to be carried out in this situation God, just get me through this moment. Lord; please just get me through this. Ease some of this pain that I feel inside; calm my nerves; Lord, in Jesus name I pray Thank God; Amen."

As I managed to rise to my feet I had to believe that no matter what the outcome; I was going to be able to cope and handle the situation. As I wiped the tears from my cheeks with a napkin a doctor entered the room in which I was waiting. Once he said I am sorry the words that fell from his pink lips where upon deaf ears. I zoned out because I knew what he was saying but I couldn't hear him. I knew that he was there but I couldn't see him. I felt myself slipping out of my body. I could see myself crying uncontrollably. This moment doesn't feel real I can hardly feel my breathing. I barely noticed the doctor walking out of the room.

A few moments later a well-dressed man entered the room and asked if I could come to identify the body. As I followed the man who shook my hand and introduced himself all in vain because I could hardly focus on anything much more than just trying to breath. He led me down a narrow hallway; or at least it felt that way because I felt as if the walls were closing in on me. Through my tears I could see a door ahead of us that was unusually different from all of the other doors that I had noticed before. I observed that my hands were unsteady and my stomach suddenly felt abnormally empty; as if I had no food in my stomach and drank some water. The man whose name I could not focus enough to catch opened the odd door and extended his hand to motion me to enter the room. There was bullet proof glass and chairs. Through the haze of my tears I could see his face. He was lying there as if he was asleep so peaceful with a white sheet covering the rest of his body. I wanted to scream; but I couldn't. I wanted him to get up but he couldn't. I was thinking that he could get up; that this wasn't real; that my son was not dead. Someone was playing a cruel joke on me; they had to be. This is just an elaborate prank my son isn't dead. I banged on the glass "get up" I yelled "get up" but nothing; not even a twitch.

My world felt as if it were collapsing and tumbling down a dark sink hole with no end in sight. Pain had stricken my entire body. Vomit erupted from my mouth; I could not catch my breath; I could not see; tears fogged my eyesight. Hands were touching my arms but I could not focus on that; my body wanted to shut down. Was he really gone? Why my only son; my only child?

Who could do such a thing to my baby? What did he do to deserve this? He did not deserve this; he was the sweetest gentleman that a woman could raise and or ask for. He was headed to college on a four-year football scholarship. Demarcus Daniels a seventeen-year-old prodigy; star quarterback, played basketball; 3.8 grade point average overall; salutatorian of the graduating class of 2014. These things and more rushed through my mind as I tried to calm myself once the vomiting stopped. Nurses hovered around me and I was placed into a wheel chair. Still unable to catch-up with reality; my thoughts lingered. Lord, I thought; I need you. My blood pressure was being taken but my breathing kept skipping. Hoisted into a hospital bed; an oxygen mask being placed onto my face covering my nose and mouth; I tried to gather my words and compose myself. Woozy and exhausted was the last feeling that I could process before passing out.

My son was my world; I was so proud of him. As a child when I was going through hard times; and would sit and cry from frustration, he would wipe my tears away and say to me; mommy don't cry I am here for you. He was so intelligent and hardworking. How could someone take my son's life? How could someone snatch my life away like that? He was gunned down in the streets robbed for material goods. The shoes; the wallet; the money; the jewelry; it could all have been replaced but my son's life cannot. Once that road is crossed there is no coming back. I pray to God that the person who did this to my son; to me gets their soul touched by the grace of God. We all have to pay for the actions we commit but I wish no harm on any man; I want a clear conscience when I stand before the Father, my creator. This pain I feel no one deserves to experience but so many do. The agony is gut wrenching; twisting my stomach into knots; tearing away at my heart. The only thing that I know for sure is God will get me through this pain and each day will hurt a little less; so long as I lean on the Lord and let him carry my burdens for me, and not myself alone.

I stood gazing out of the window not really paying attention to anything; sobbing. So there I stood blinded by my tears; crippled by my fears; longing for his touch so it wouldn't hurt as much. Crying for him to return but I would never learn; learn that if tears could bring him back, he would be just that.



" A sharp evening" by Chaitali Anand

**Father and Sun**

Alvin Gladson Varghese

Crisp cool air brushes against your face  
as your father picks you up  
and seats you on his left shoulder.  
You point to a blue jay,  
which soars through the sky,  
fluttering its vitreous feathered wings,  
reaching greater and greater heights  
as it heads towards the rising sun.

Your father reads the paper,  
adjusts his new glasses,

and scratches the sagging skin of his face  
with a trembling hand.

Pushing your seat back,  
you leave the house  
to return to your home  
and attend to your own family.

While walking outside,  
you shield your eyes with your left hand  
from the glaring sunlight  
radiating from the Zenith  
and any blue jays  
that maybe in-flight.

Lying silently on a bed,  
in the middle of a room,  
devoid of sound and heat,  
your father stares blindly.  
He barely blinks his eyelids  
as you grip his pale right hand  
and look out a window across the room.  
As the sun begins to sink

and your hands start to feel colder,  
a blue jay falls from the tree tops,  
landing ventrally on the window sill,  
with its eyes shut  
and beak pointing westward.



"Crack in the Mountain" by Micheal Chrusciel

**The Canvas (Domestic Violence)**

Radhika Rastogi

It hurts, you know  
To look in the mirror  
And see a bruise  
That wasn't there.  
A bruise that only you can see  
Covered by layers of memory.  
First painted pale pink with a word too sharp.  
Red streaks of anger color the mark.  
Then a layer of blue, of sorrow too,

From a hand that maybe struck too true.  
A final purple of broken bonds  
And pooling blood as you despond.  
Covered up by a few kind words,  
A careless foundation of lies so absurd.  
Yet, you think perhaps, it's just this time  
That you can just forget the crime  
But then it starts again, anew  
And oh, this is something true  
A layer of pink, you hear and feel  
That it's only the first time, a single reel

But the buried layers form, still there  
And their pain and cries you can still hear  
At last, you think, for the kids, I'll stay  
But even that excuse will fall away  
Until, the vivid bruise stays clear  
And you will stare at the mirror,  
Eyes haunted with persisting fear  
That you have lost what is truly dear  
Yourself; And then you truly know  
That you must leave, just pack and go

Or else you will be lost forever  
In this painted black abyss.  
So walk free, of those chains, that bruise  
Yes it may be part of you  
But you can color yourself too,  
Paint yourself a fiery orange,  
A smiling yellow or calming green  
For it is then, when you wield the brush,  
That you can find your color, your dream.



"The Path Taken" by Maliha Ahmed



## The consequences of losing your patient

Andrew Darmahkasih

*Dr. Moore sat us down on our first day on the general medicine floor and told us that the best thing we medical students can offer for our patients is to pull up a chair, sit down, and listen to them. Out of all the things we do, this is how medical students can add the most value to the team. Patients have stories to tell, and by simply listening to their stories, we can better understand our patients, and then in turn help our team better care for them.*

*He never warned us how emotionally attached to our patients this would make us.*

---

Out of all the patients I cared for during my Internal Medicine rotation, I built the closest bond with Mr. G. He was an older man with little medical history who had a complicated hospital course for possible vasculitis. After spending a couple weeks at an outside hospital and another week in the MICU, he was transferred to our floor when he appeared more stable. My intern, wanting to provide me with the experience of working up more complicated patients, asked if I would see him.

I spent several hours poring through his lengthy chart, and I couldn't help but feel a terrible sympathy for him and his family. He walked into the emergency room with difficulty walking and generalized tingling sensation over his hands and feet, and here he was 3 weeks later, bed-bound with a brain hemorrhage, renal hematoma, GI bleeding, complicated pyelonephritis, among other issues. Somewhere in his chart, it was mentioned that they were upset with the care they received at the hospital, and I was unsure how they would feel about being transferred to the care of another team - no less under the care of an incredibly inexperienced medical student working with an intern who had spent less than 2 weeks on the floor.

I cautiously walked into his room, introduced myself, and began by apologizing for what I knew had been a trying 3 weeks for him and his family. I explained that I was merely a medical student working on the team, and that our role as the general hospitalist team was to manage his care. Despite having limited abilities as a medical student, I wanted them to know that I cared for Mr. G and his family - and I promised them that we will do everything possible to give him the best care we can offer.

I also promised to communicate with them and make sure that they are in the loop at all times. They had been frustrated because they felt like no one told them what was going on, only that Mr. G may have "vasculitis" (without even explaining what this meant). As the only person in the medical field in my family, I deeply sympathized with them. I spent time explaining what vasculitis is, what may have caused it, and why we think it may be causing the symptoms he was experiencing. I promised to explain everything without medical jargon, and I offered to be the medical "translator" if they ever had questions about a particular symptom or diagnosis.

Perhaps it was that first initial conversation that made me unusually attached to Mr. G and his family. Over the course of that week, I would enter his room at least a few dozen times. I thoroughly examined Mr. G every day and worked on managing his worsening conditions with the appropriate intervention. I also spoke with his wife daily and updated her regularly on lab results, findings, imaging studies, consults, etc.

On the day when he went up to neurosurgery for a nerve/muscle biopsy, the transport team taking Mr. G refused to take his wife (whose mobility is limited), so I offered to transport her personally with a wheelchair to the pre-operative waiting area.

After the operation, I returned to his room to make sure that he tolerated the procedure and that he was recovering well. I asked if his family had any concerns, and they mentioned that they were unsure whether he was able to eat now that his surgery was over. After confirming with my team, I returned one last time to make sure he got the tray of food we ordered. I told Mr. G and his family them that it was my and my intern's "golden weekend" and that we would be off for several days. I told them that I would check in on them via the electronic medical record over the weekend, and that I was looking forward to seeing them on Monday morning.

That was the last time I saw Mr. G alive. That evening, he decompensated and began with frank melena in his stools. The following morning, he was transferred back from our floor to the MICU. I never personally saw him or his family, but my intern would see his family from time to time and would let them know that I was thinking of them.

Indeed, I was always thinking and worrying about Mr. G. Even when he was removed from our team, I would check on him at least once a day, partly out of curiosity to see whether we would ever determine a definitive diagnosis, and partly out of concern for him and his family.

I suppose given the fact that I was following his ICU course and that his medical condition was rapidly deteriorating, it probably should not have surprised me when he passed away. But nothing can really prepare you to see the "Dcsd" status next to a patient's name. I was devastated and crushed. I guess I did not realize how emotionally attached I had become to Mr. G and his family despite only spending a week's time with them. I could not focus on anything the rest of the day, distracted by the fact that a patient I had deeply cared for was no longer alive, and that his family is now grieving. My complaints about the difficulty of the shelf exam, my celebratory dinner party with my team, my assignment for the next day - they all seem so insignificant in comparison to the loss of a life.

*I think what really haunts me is whether we could have done anything to prevent his death. On one hand, I knew that we gave it our best shot and that there was little I could have done in one week that would have significantly changed his deteriorating condition. Still, doctors are trained to heal. We like to think that we can fix everything. This is especially true in an inpatient setting, where we have a significant amount of “control” over the lives of our patients.*

Dehydrated? Start an IV line and give normal saline.

Fluid overloaded? Give them IV furosemide.

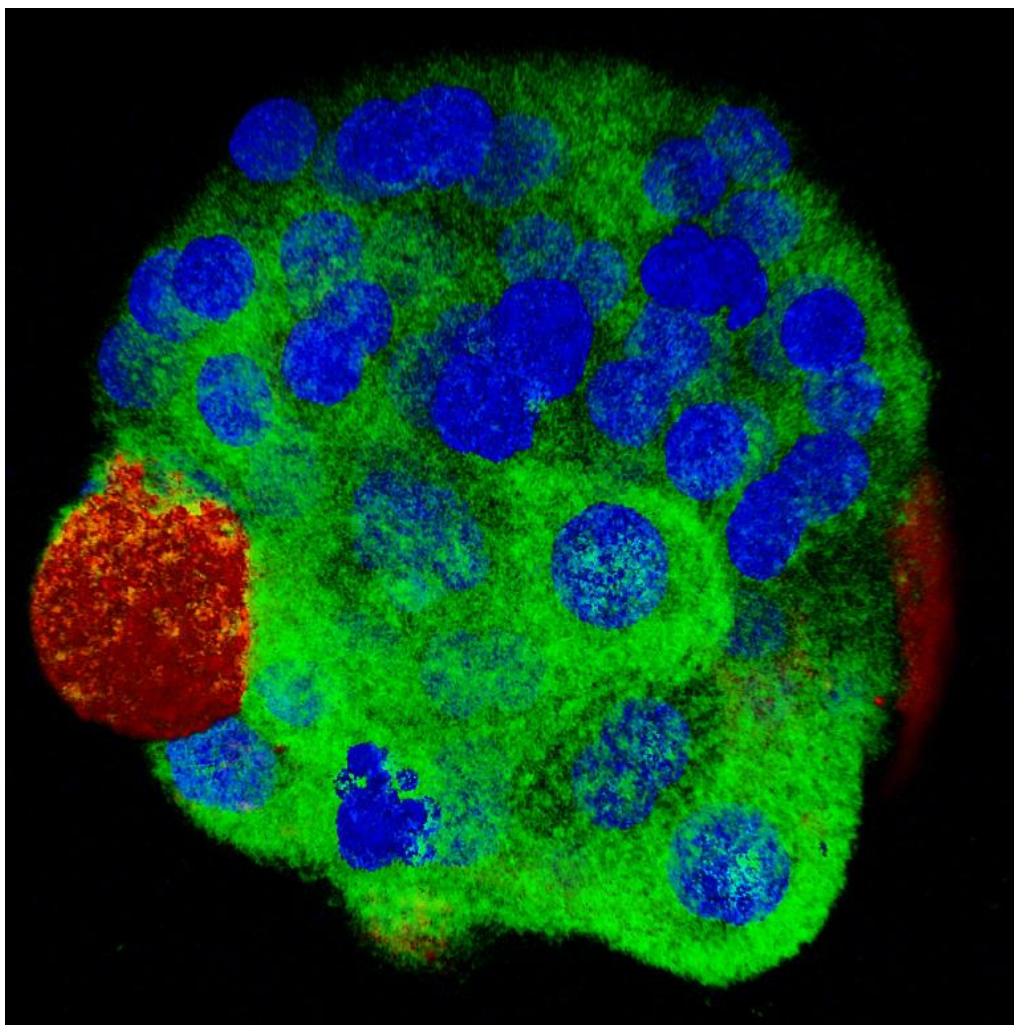
Infection? Start antimicrobials.

*We are trained to act like we can fix it all. But there is little to prepare us when all our interventions fail, when the patient we have so carefully doted and cared for decompensated before our eyes - and there is no medical intervention we could do to stop it.*

*My intern told me that perhaps she and I both have grown too close to our patients. Yes, this is probably true. But isn't this what makes us human? Aren't emotion and relationship what make us physicians and not medical knowledge-spouting robots?*

---

Later on that week, my intern and I visited his family at his funeral service to offer our condolences. Even while grieving, his wife hugged me tightly and whispered, “Thank you for everything you did for him. We are thankful we were under your care. We know that you did everything you could for him - and for us.” While perhaps the details of how I attempted to build a relationship with and offered compassion to Mr. G and his family are quickly forgotten, I know I made a difference in their lives - and that is the most rewarding part of being in this profession.



"Breast Tumor" by Seema Shah

**Am I my disease?**

Radhika Rastogi

When is a disease an identity?

Is it when my doctor comes to me

And sees through who I am to look at my  
cells, my heart, my lone kidney,

Is that when I become my disease?

Is it when the disease changes the makeup of  
my very body, my skin, my heart,

When my body fails to start,

Is that when I become my disease?

Is it when the doctor steals a limb, an organ,  
snatched from my depths,

When I am now missing a part of my body, a  
theft of breaths

Is that when I become my disease?

Is it when it hijacks my brain, changing my  
actions and faith

When my brain claims that I have become  
some wraith

Is that when I become my disease?

As my brain and body fail and I lay in bed and  
rail

At my fate, as my disease acts to conquer my  
mind's state

I know that I am not my disease

Even as my body becomes immortal as cancer

Or steals my nimble movements as a dancer

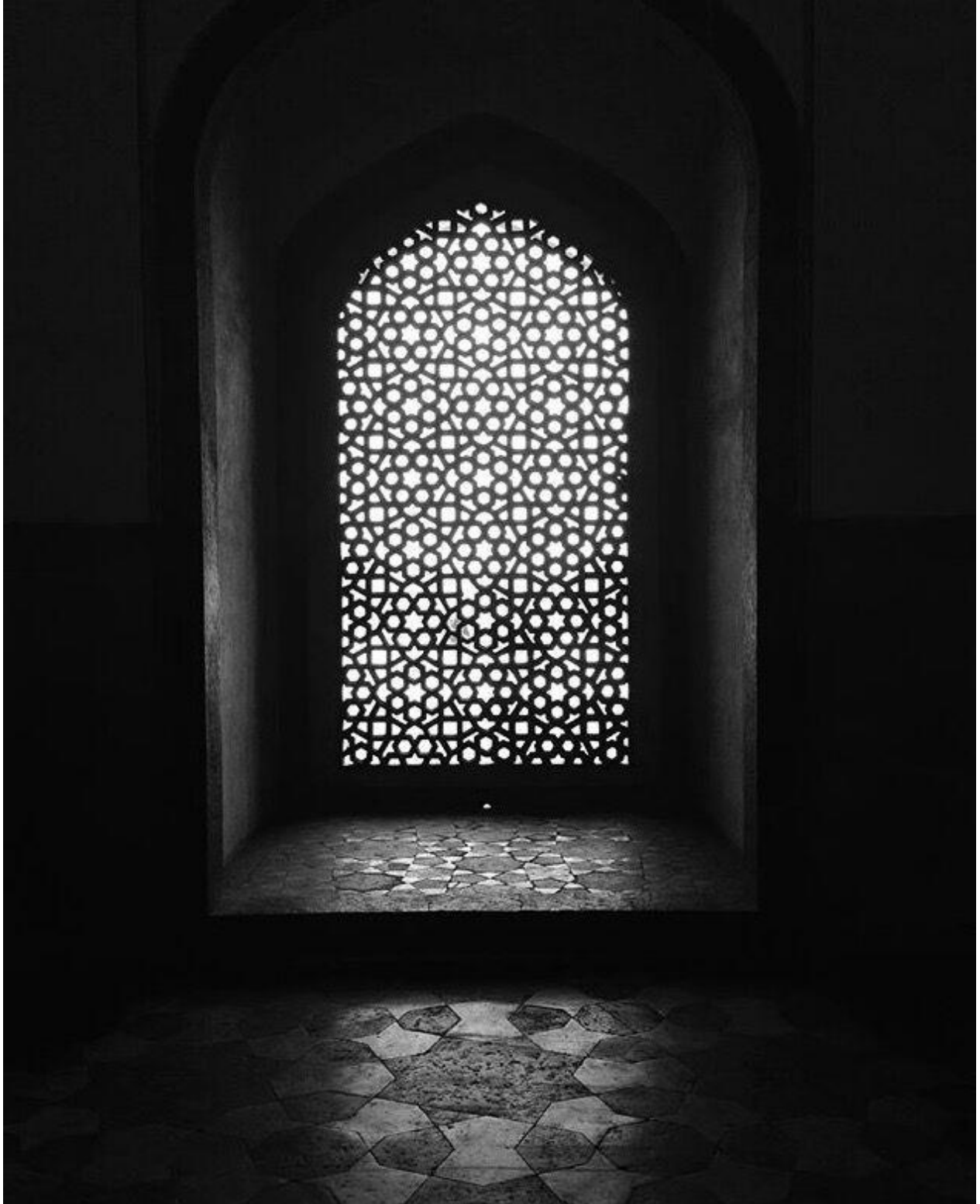
I know I am not my disease.

For my disease can consume my body, my  
physical form

But my mind remains an indomitable storm

And so, remember one simple fact, please

I am not and will not become my disease.



"The wound is the place where light enters you" by Maliha Ahmed

## **Cadaver Donation Memorial Speech**

Eric Franz

Thank you all for coming to commemorate the deeply personal donation made to the Wayne State University School of Medicine. On behalf of myself and my fellow classmates, I would like to say that it has truly been an honor to work with and learn from your departed loved ones.

Unfortunately, this is an honor that is becoming increasingly scarce in the world today. Across the country, medical schools are turning to text books, models, and even holograms to teach the intricacy of the human body. Despite their advantages, these methods share a common failing. They attempt to reduce the body to a machine, a machine composed of well-defined and standardized parts, a machine that we, as future physicians, will one day maintain. Those of us who worked with your loved ones have seen the limits of this analogy. We have seen, even in death, the inherent uniqueness of each individual. More importantly, we have, for the first time, encountered the extreme intimacy and trust endowed to members of our profession.

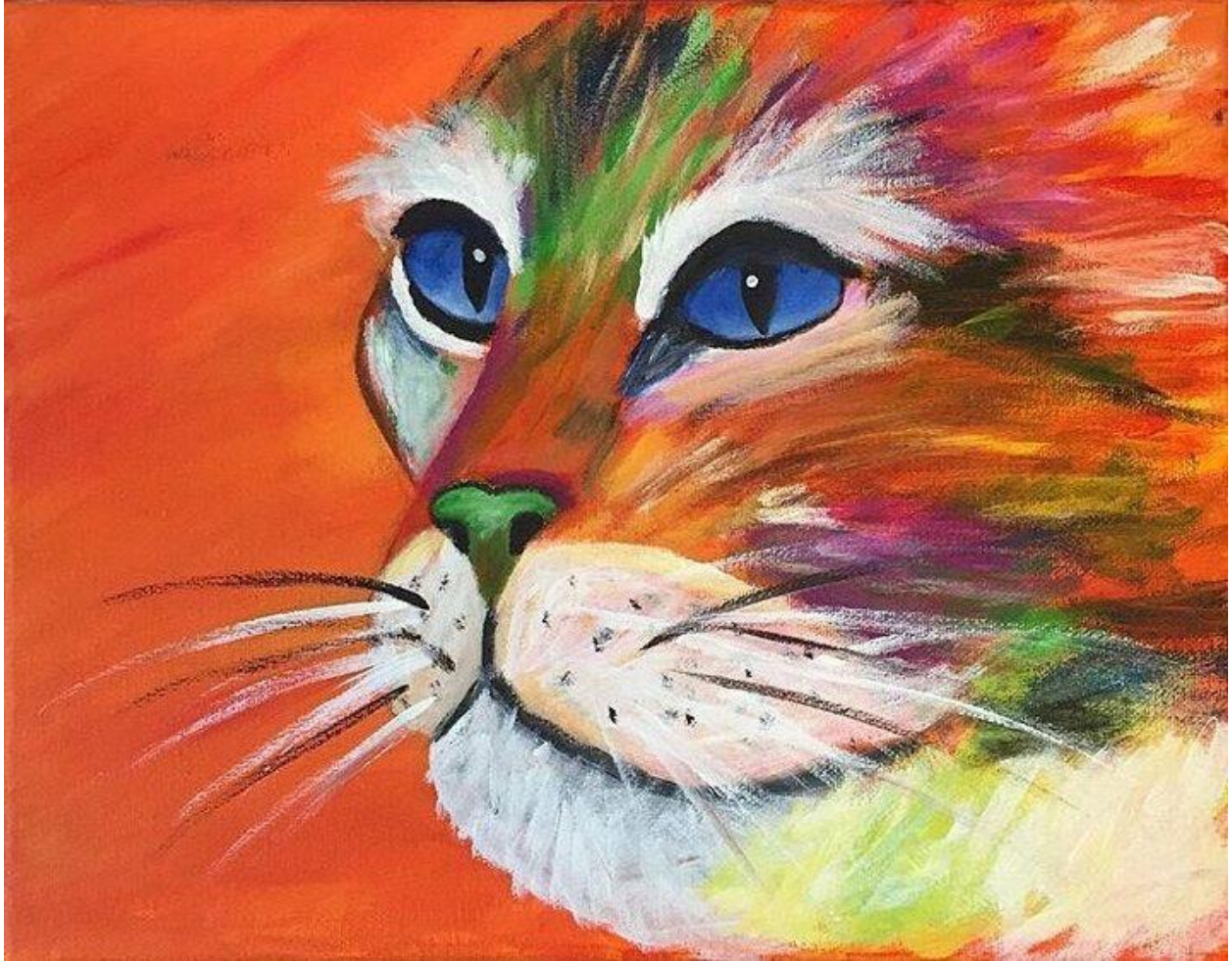
Throughout this past year, our professors reminded us that our cadavers were our first patients. Walking through the Anatomy Lab on the first day, the sentiment was lost on me. I couldn't help sarcastically thinking, "I hope they don't expect us to bring these people back to life." As our course of study progressed, however, the comparison became increasingly apparent. Like a doctor in clinic, we were being given the privilege of working on the body of another human being, to see its frailties and weaknesses laid bare before us. Implicit in this exchange was an unparalleled level of trust placed in us by those we worked on. Trust that we would respect and care for their bodies even after they had passed. This is a privilege so immense that it must be encountered early and reevaluated regularly to be fully understood and appreciated. The only reason my classmates and I have been afforded early exposure to this privilege is the selfless donation made by those we remember here today.

Textbooks and models and holograms are nothing more than learning tools. Your loved ones, however, were the archetype for all future patients we will serve. They were people just like us who laughed when they were happy, cried when they were sad, and endured the million trivialities that constitutes the day to day living that comes in between. And, yes, like the people we hope to one day help they placed themselves in our hands as their story came to a close. By studying your loved ones, I learned more than I ever wanted to know about the human body. *So much more than I ever wanted to know.* But I also began to understand the true nature of the responsibility I undertook

by pursuing a career in medicine. A perspective that isn't always clear when the first two years of our education are almost entirely bookwork. If I'm being honest, basically all we have done so far is study and we take tests. *So many tests*. But the technical knowledge we are tested on constitutes a rather small part of what it is to be a physician and treat patients. The art of medicine is ultimately the art of building relationships with people, relationships that allow us to effectively and compassionately guide those seeking our council. We must remember that despite what we are studying now, medicine is fundamentally a social science that cannot be separated from the humanity it aims to serve. Because of your loved ones gift to us, we started our medical careers learning, not from tools, but from humanity. This distinction, this humanistic base, will undoubtedly make us better practitioners as we progress in our lives and careers.

The contribution most of us make to the world will end with our passing, but for those who were so generous as to give themselves to us for our education, their contribution will endure in every patient we treat and every life we hope to save. My classmates and I hold your loved ones in the highest esteem and are forever indebted to them for the service they have done. Though you have suffered a loss, it is my sincere hope that the knowledge of the gift that was given to us and its significance will console you as you carry on with your lives. Thank you for listening. I wish you all the best.





"Cat" by Faiz Khaja

**Early Saturday**

Michael Lisieski

Sleep being the same

as rest (at least today)

he savors the morning,

notices little things;

the rough spot

in the venison.

He spits it out,

rolls it carefully

like a pill.

*It's gotta be*

*a tumor.*

*Maybe*

*I should call*

*the oncologist*

*after all.*



" A Detroit Aesthetic" by Moaz Sinan

## **Studying in the Library: A Medical Student's Perspective**

Charlie Tsouvalas

Cold hath no fury, wind no bite, where I slovenly slouch.  
Howls from the winter fiend shushed by an ever-looming grouch.  
Truth, it's warm: no ice can gnaw mine hollow pallid cheek -  
My comfort feigned – a soul that's severed from humanity,  
By this tepid prison I now enter bathed in bleak.

Cold, shatter these shackles, destroy this demonic carrel.  
Wind, do tear my flesh; teach a pain beyond these books so sterile.  
Alas - Cold can't enter since Wind's fingers jamb the door.  
Alone with all the drones of Satan's catch where I belong,  
Students learning to be learned slaves forevermore.

Thick coats of crust are glazed on waxy masks of nameless meat,  
Each face lost and pained while searching text with downright defeat.  
Days of grime and filth that harden skin but weaken soul,  
Days marked by hair that's tied to hide the layered oily sheen -  
A calendar to serve perverted time without console.

Those seeking shelter look for hope where knowledge doth reside,  
No city on a hill but rather spider's web where hide  
Such sure scholars wearing tattered morals with conceit,  
Exploring Plato's cave to teach the shadows cast,  
But none distinguish from their souls now lost beneath concrete.

Each day descending deeper than whence I ventured before,  
Chasing Dante's steps to a hell I once begged to ignore.  
Oh! Mine hazy past despises that which I now embrace,  
Here where none permit delight or petty dreams or prayers,  
A vacuum for sound, yet parade of forsaken face.

Now don't you grieve for me! I choose this Faustian fate each day:  
Rushing to ravish knowledge in my cave, consume my prey.  
Rejoice the sacrifice: with lost humanity comes strength.  
Don't mourn the weak or praise the bold, but raise your glass to me.  
Lacking friend or heart once brought me doubt; yet I can cry in glee:  
A scholar, with mine icy knowledge, truth has now set free!

## My Short, White Coat

Anonymous

The day of my White Coat Ceremony was a day of immense pride. Sitting there with hundreds of my future classmates, I couldn't help but feel that something great was at the tip of my fingers. I felt like I was exactly where I was supposed to be. The day provided me one of the most powerful moments of my life when my dad, my biggest role model in life and in medicine, walked across the stage with me, clutching my white coat in his hand. As he lifted it onto my shoulders, it felt like years of planning, studying, and hard work were stuffed into that short, white coat. I recited the Hippocratic Oath in that white coat, took countless pictures in that white coat, and spent the day with my family in that white coat. I may have even worn it to sleep that night.

Fast forward three years to the present day, to the end of my longest work day of the year, a 36-hour overnight call shift on my Trauma Surgery rotation. Exhausted and filled with a wide range of emotions that came after seeing a young patient die in the Operating Room, I took off that same white coat (now wrinkled and tinged with multiple coffee stains) before walking through the wards to check on my patients. Wearing only scrubs, a stethoscope around my neck, and the trauma pager on my belt loop, a sensation came over me that I could not place until later in the day: I felt free.

Because for me, that same white coat has now come to embody all that frustrates me about being a third-year medical student. That same white coat has now come to represent just how far I still have to go.

At the beginning of our third year, we were told that the medical students were an integral part of the hospital fabric, that our contributions were vital to the successful outcomes of our patients. To some extent, this is true. Whenever I walk into a patient's room, I make a conscious effort to greet them with an upbeat and compassionate attitude. Although I can't always assist my team with writing notes or placing orders, I know that those few extra minutes that I can spend with our patients will go a long way towards a productive hospital stay. And there are plenty times where I've felt useful: helping patients ambulate after long bouts of bed rest, spending an extra couple of minutes in clinic explaining to a child's family the pathophysiology behind a recent diagnosis, coordinating post-discharge care between patients and their primary care physician, or being an extra set of hands while in the Operating Room.

But to say that my daily work is necessary, or even helpful, would be a stretch of the imagination. When I round on my patients in the morning, I'm keenly aware that the residents will be knocking on the patient's door in just a few short minutes to ask the exact same questions. When I present a patient's history and overnight events to the Attending physician, I'm inevitably interrupted by the resident as they report an update that I wasn't privy too. I admit that these are good things—it would be irresponsible to entirely trust me with a patient's care at this point in my training. There is so much I have yet to learn or experience. But at some point, I can't help but question the value of my time and energy; what is my purpose at the hospital when it feels like all I

have done is interrupt the patient's sleep or delay the completion of our team's morning rounds? What am I really contributing when the majority of my day is spent trailing a resident like the wake behind a speedboat?

I understand that this is part of the learning process, that every doctor who has come before me has at some point felt the same way. I understand that I am not defined by the length of my white coat; the lessons and emotions that I am currently experiencing are laying the foundation for what I hope is a long and successful medical career. Not a day goes by where I don't recognize how lucky I am to be doing what I'm doing, often seeing death juxtaposed with life-saving therapies in the same day.

I also respect that not all of my classmates feel the same way. I have heard many a classmate remark on the importance of their work or how their identification of a lab value or symptom led to the patient's ultimate diagnosis. I applaud them on their optimism and sense of accomplishment. Perhaps I am just jealous that I have yet to experience a moment like that. Yet I have found that my greatest strength—being able to put myself in other peoples' shoes—is also my greatest weakness in the hospital. I too often care more about not disturbing other people than I do about enhancing my own learning experience. I know that residents have more pressing issues than teaching a medical student a concept or procedure that they learned years ago. I know that Clerkship directors have better things to do than to haggle with me over a resident evaluation or examination grade. Sometimes it feels like us medical students are like bunnies, hopping from rotation to rotation, service to service, team to team, yet another face in a stream of endless short, white coats.

Maybe this is a pessimistic view. Maybe I need to revel in, not repel from, this period of ignorant bliss. For one of the final times in my life, I am a student unburdened with responsibilities. I see patients, I ask questions, I learn from my mistakes. I am trying to be a sponge, soaking in every new experience so that I can squeeze out that knowledge when the roles are reversed. And don't get me wrong. Third year clerkships are inordinately better than the first two years of medical school, years that were arguably some of the most miserable of my life. I love interacting with patients, getting to know their stories, and facilitating the trust that develops between patient and their treatment team. One of the best pieces of advice I've received thus far is that there is something to be learned from every patient, and I've found this to be unequivocally true. The most memorable patient I have cared for this year was a homeless, HIV-positive gentleman who presented to the hospital with a myriad of medical problems. I learned much about treating HIV, pneumonia, and cardiac arrhythmias from his case, yet it was my day-to-day interactions with him, from learning about his past to bringing comfort to his present, that stick with me the most. For me, the joy of medicine does not come from the medicine or surgery itself, but rather from the ability to tailor our management to the uniqueness of every patient.

I know that it might sound silly or that this is all in my head, but when I walked through the hospital that early morning without my white coat on, *it* felt different. *I* felt different. It felt like the nurses gave me more information on my patients than they normally do. It felt like people saw me walking confidently down the halls like a capable provider, not as an underutilized, frustrated medical

student. It felt like I wasn't weighed down by the preconceptions that hang from that short, white coat. It felt like I finally belonged.

So where does that leave me with 16 months left as a medical student? How do I justify giving it my all when it feels like nobody needs my all? How do I use these experiences to project as a confident, mature applicant during residency interviews next year?

The answer may lie in the words of Dr. Jonas Salk, the noted virologist who created the Polio vaccine in the 1950's. Dr. Salk holds a special place in my life; in third grade, I gave an impassioned presentation about his life while proudly wearing my father's stethoscope and long, white coat. To this day, I consider that presentation a defining moment in my lifelong pursuit towards becoming a doctor. In a 1991 interview, Dr. Salk said, "Some people might look at something and let it go by, because they don't recognize the pattern and the significance...It's a matter of being able to find meaning, whether it's positive or negative, in whatever you encounter." (Academy of Achievement). That first year Anatomy exam that left me close to tears? A lesson in studying, recognizing my weaknesses, and making changes for the next exam. Those long, boring, frustrating hours spent studying for Step 1 during second year? A lesson in perseverance, dedication, and sacrifice. These perceived slights based on the length of my white coat? A lesson in working hard even when nobody is watching, of realizing how I want to treat medical students when I'm the physician in charge, and understanding my role within the team and hospital ecosystems.

I may never cure a disease like Dr. Salk, but in a couple years, I will be trading in that short, white coat for a long one. Stuffed into those few extra inches of fabric will be the thousands of memories and experiences I'll have learned throughout my four years of medical school. It hasn't been easy so far, nor do I expect it to get any easier moving forward. Yet I find solace knowing that I've grown as a person and as a professional not despite my frustrations and struggles, but because of them. I will leave medical school as an able clinician, but perhaps more importantly, as a confident individual.

"Jonas Salk, M.D.: Jonas Salk Interview, Developer of Polio Vaccine." *Academy of Achievement*. American Academy of Achievement, 16 May 1991.



"Symmetry" by Moaz Sinan

### History

Tricia Fernandez

So, what brings you in today? *I'm sorry.*

Mm-hmm... and when did it start? *This was never supposed to happen.*

Describe it to me. Does it radiate? *I've heard some marvel that we are made of the same matter as the stars.*

How painful is it, scale of 1 to 10? *It is the stars who should marvel to share their matter with us.*

Does anything make it better, worse? *Look under the microscope, and you will see a thousand little monks illuminating a thousand tiny manuscripts...*

Any fluctuations with the time of day? *Hurry—we may yet catch them at their vespers!*

Is there associated nausea, vomiting, dizziness? *But they are seizing the monasteries, smashing the icons, and nothing will ever be as it was.*

Okay, I'm just going to go into a little of your history: *We were royalty. We still are.*



Do you have any ongoing medical conditions? *And I tell you now, that I have seen kings covered in bed sores,*

History of surgery or previous hospitalization? *queens with amputated legs,*

Do you take any medication? *proud princes overthrown by substance use.*

Are there any family members with similar problems? *The outrage is unbearable!*

Now for a few social questions... *Our bodies are entire civilizations, rising and falling,*

Any alcohol, tobacco, other drugs? *subject to siege and storm and civil war.*

Are you sexually active? *We cannot live forever.*

How is your diet and exercise? *But I promise, we will fight the good fight, together, all the way down to the end,*

Do you have any final concerns? *when we will return dutifully ashes to ashes, dust to cosmic dust.*

Thank you. *And the stars, following us, will wonder at our majesty.*

**Forgotten**

Dana Sugar

You would miss her completely if it weren't  
for all that wailing.

What theater, what gall, what gumption.

To come in here off the street and wail like  
*that*.

Has anyone seen her yet?

She is slight apart from her swollen belly,  
violating your eyes.

Tattooed from stem to stern, each one an  
afterthought.

She twists and writhes, uncooperative.

Her pain, a nuisance.

If you will just hold still so I can do my job.

"Please" she says.

She is everything that is wrong with this  
country.

"It looks fine here, there is nothing wrong  
with you."

She must have been told that before.

She probably didn't listen.

We can take her in for a while.

She seems to be making quite an effort

After all.

Just don't give her any drugs

Because I've seen real pain before.

Now we are running.

Everyone is running.

She is barely in the room when

She is flayed wide open.

Stem to stern.

Life taken out of her

And pushed back into her.

Another tattoo.

And can you believe her urine was clean?

No shit.



"Flower" by Faiz Khaja

### **Facing Huntington's**

Kevin Zhang

I sit there reading the Oath of Maimonides while waiting to present the next patient to Dr. Kaner as he finished up in room two. The English version is laid just to the left, mirroring the oath written in tortuous Hebrew characters, a clear refinement of calligraphy. As I'm letting the pureness of those words settle within my own definition of medicine, the nurse steps in and gives me a little head nod towards room two. "Kevin, Dr. Kaner wants you to see his Huntington's patient.

So here it was, one of the handfuls of "Uh-oh" diseases. It's one of those diseases that simply carries a sense of doom with it. There's nothing good about it. It joins the ranks of diseases such as pancreatic cancer, progressive supranuclear palsy, ruptured abdominal aortic aneurysms, *Naegleri*

*fowleri* (aka brain-eating amoeba), Creutzfeldt-Jakob disease, Tay-Sach's, idiopathic pulmonary fibrosis, and basically any Stage IV cancer. Amongst these, there are some feel good stories sprinkled occasionally between them with someone beating the odds. But still, you never want to hear any of these conditions. And even past that, there's something that makes Huntington's still reign supreme over its other menacing adversaries. It always has an ominous air to it whenever spoken. Something I was beginning to truly understand why.

*Okay Kevin, so here we have SW. She's a 45-year-old Caucasian lady who came in last year complaining of gross motor issues. She also reported occasional forgetfulness that was very unlike her. We worked her up and she came back negative on every neurological condition except for one—her eventual diagnosis. We weren't able to get any information on her parents because she was adopted. But from what we can see, she's progressed rapidly in the year since her initial presentation.*

I look at the lady and there she is, sitting next to her husband with a blank stare, intermittently tossing her limbs into choreatic, dance-like movements. And I can see her internally battling the urge to make these movements, but the resistance is futile. One way or another, her Huntington's is going to prevail. So she sits there, forced to make these rhythmic, jerky motions as if Huntington's disease is some sick puppeteer born without any sympathy—malicious and relentless. It's hard to believe that just a year ago, she was simply living her life and out of nowhere, she has had all control stripped from her.

*Okay, so last year we performed the Mini-Mental Status Exam and she scored a 22. So Kevin, how about you do another one now.*

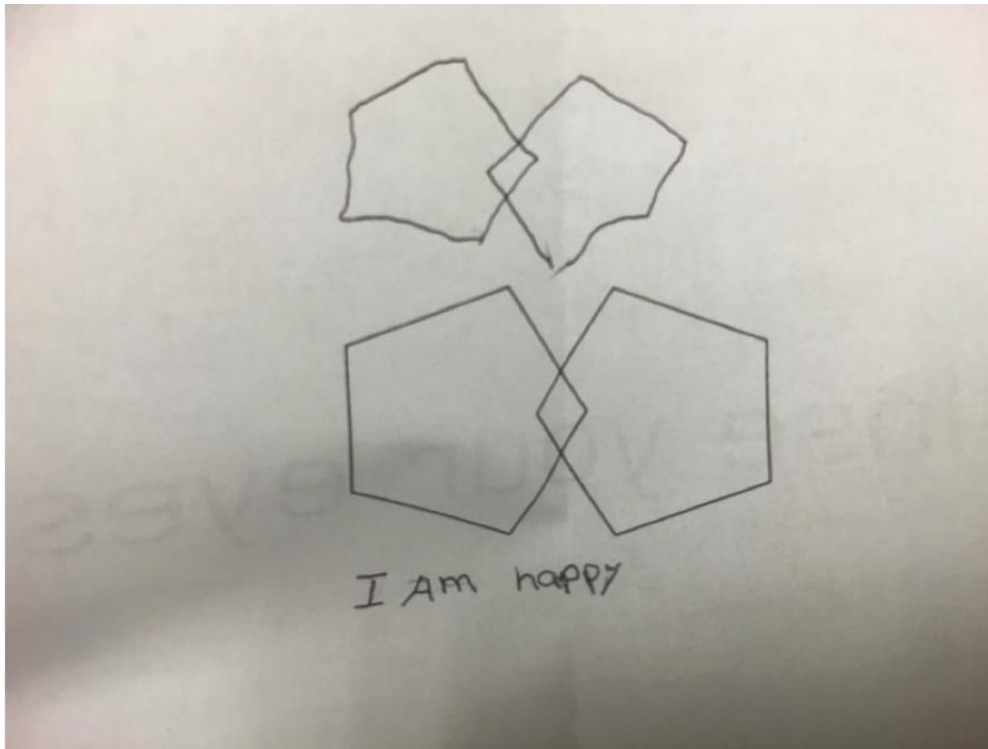
So the Mini-Mental Status Exam is a 30-point questionnaire with a couple small activities that assesses one's mental status, essentially trying to quantify one's severity of dementia. Anything above

24 is considered normal but once you start dipping below that, you start getting concerned. Below 18 is when the dementia is considered becoming really severe. So I begin asking her the basic questions like if she knows the date, day of the week, season, where she is, the county, the year, and so forth. She gets a couple. Then I tell her to repeat the words ball, flag, and tree and to remember those words for later. She repeats them, perfect. Next the serial 7s, I ask Mrs. W to subtract 7 from 100, then subtract 7 from each subsequent number. She gives me 93, 87, 80, and 83.

*Mrs. W can you repeat the three words I told you to remember from earlier?*

Nothing. Now she has to identify my watch and my pen. Check. Now can she repeat the phrase “No ifs, ands, or buts”? A little slurred, but acceptable. Okay now she has to take this piece of paper, fold it in half, and place it on the table. Close but not quite. Alright, now she has to read the sentence written on the paper aloud and do what it says: Close your eyes. Nope. Now copy this image of two interlocking pentagons to its right. Okay, I’ll take it. And finally, can she write a sentence that makes sense. As I watch her fight her disease, she musters as much fine motor control as she can. She’s much more committed to this task than copying the interlocking pentagons. And the words start materializing really well actually. So as I stand there watching her write with complete diligence and determination, I begin to realize why this sentence means so much to her. It means so much to her because she wants to believe it. She needs to believe it.

I...a....m....h....a....p.....p....y.



She hands the piece of paper back to me and in that moment, I'm stunned. The significance of that small moment rattles me and I momentarily stand there with a glazed over look.

I turned to Dr. Kaner, "She scored a 16."

*That's not good, she's definitely progressing a lot quicker than I expected.*

So Dr. Kaner proceeds to talk with the family, educating them more on her disease and what they should expect. I pick up a couple details like how she has two sons, a two and a six-year-old back home, she has hit the husband several times, and she's becoming more forgetful. But for the most part, I zone out for this portion of the conversation because I'm still fixated on that moment where she wrote that sentence. Immediately, the image of the true monster that Huntington's is became so clear to me. Mrs. W is just this helpless lady held behind iron bars wrought by her disease. At times

she's able to escape this prison and find freedom—revealing her true self. And at first it's easy. But with time, Huntington's forges a stronger barricade, further cementing the permanence of her state as it figures out how she managed to escape again. And the longer she's behind there, the more she's lost. So writing that sentence was her opportunity to show us all that she was still there. What's usually such a simple task meant the world to her because it showed that she wasn't going to lose. But as much as it pains me to say it, I have to gravely admit that she would lose—they all do. There is absolutely no cure to Huntington's disease. There's symptomatic control of the choreatic movements, psychosis, and depression that comes with Huntington's but none of this slows the progression of it. Depression amongst those with Huntington's is so rampant that nearly 10% of patients end their own lives while they still have the cognition to do so. The disease starts to set in around ages 30–50 and there's only decline from there. Loss of motor function, replaced by these sporadic, dance-like motions. Loss of cognition as they slowly drift into dementia-ridden limbo. Loss of their sanity as they become more aggressive, irritably, and eventually become a mere physical representation of what they once were. They lose everything.

And as Dr. Kaner is wrapping up, I look over at the husband's arm and notice a tattoo of DNA's characteristic helical spiral that binds our very existence. And at one end, I see the letters SW inscribed along one of the rungs of this twisted ladder. On the other end, I see the letters HD. I knew the husband's first name began with a J, so it could have stood for none other than the very disease that has cursed this man's family. But why does he have that tattoo? I want to ask him so badly. And to this day I still wonder about the significance of that tattoo. Does it assuage his pain by him permanently acknowledging that the fate of his wife is unequivocally bound to her genetics? Is it a reminder to him that no matter what his wife becomes, that it's not her fault because her entire future

is dictated by this faulty gene? And because it's an autosomal dominant disease, both her children have a 50% chance of acquiring it. Have they tested their sons? Is the tattoo a reminder that dismisses his wife from all fault from their sons' potential futures—trying to personify this disease thus making it easier to vilify it? Is it a reminder that everything is out of their control?

So in the moment, was she truly happy or not? I really can't say. But at least she still had the capacity to acknowledge what happiness was. And although it was difficult to stomach seeing her in this position, I'll always appreciate that sentence she wrote and the tattoo her husband had. Because even though I don't know its true meaning, to me, it represented the boundless resilience of the human spirit in a situation of complete hopelessness. And every time that patient walked into that room, she relinquished that resilience over to Dr. Kaner, entrusting him wholeheartedly. That's what gave him the power to help. And it's in those situations—where there's so little that can be done—is where he does the most, “for the knowledge of healing is boundless.” And in that moment, I couldn't help but think, “This is why I'm doing what I'm doing.”





"Reflection" by Maliha Ahmed

### **For Fawzeih**

Anonymous

Imagine your life as a piece of canvas. In the beginning, it is completely blank, waiting...now think of every person you have ever met. Each one of them is an artist. Each with their own paintbrush. As your life progresses, the people you are surrounded by begin to create the painting that is your life and quickly, the picture becomes more complex, more detailed, and more beautiful. As you look closer, you begin to appreciate each artist for his or her distinct style. Eventually, you start to feel the artist. And that is what is most important. How they make us feel. My grandmother is done painting now. However, every artist has a prescribed time at which they must lay down their paintbrush because their own painting has been completed by Our Lord Allah, the greatest artist of all. It is He who imparts the final brushstroke for us all, just as it was He who imparted the initial. When I look back at my own canvas I remember how she made me feel. She filled me with joy, gave me strength and made me better every time I saw her. She was an absolutely remarkable human being and my love for her is infinite. Her paintbrush blessed every canvas it ever touched and her colors empowered every pair of eyes lucky enough to see them. Her essence will forever live in our own paintings, for every time we look back, we will feel her gracious presence and be reminded of her devotion. Now, she rests framed in the Kingdom of Allah, completed in His vision, a perfect painting.



"Blending In" by Michael Chrusciel

### **Crossing Guard**

Michael Lisieski

The most important things

survived the translator.

She laughed and said *it's easier*

*to go bald when you wear a hijab.*

-

She saw the roadkill move, and yelled.

The pheasant was only intact enough

to flop and squeal as I approached  
to wring its neck. Cars kept passing

and we gathered the cleanest feathers  
to hang in our home. Since then,  
I ask pedestrians if they want help  
crossing intersections.

-

The doctor closed her laptop.  
She explained how to touch the dying.  
*Don't worry. There's always a way  
to help one another along.*

## Unbeknownst Courage

Fareea Khaliq

They say big words, elongate simple passages, complicate simple truths. They claim it is an embolism, they claim it is insufficiency. They diagnose and ask for my input. They tell me to look at the figure who's looking at us in desperation. They ask me the condition of his heart; I tell them the condition of his soul.

Because when I see someone on a hospital bed, lying in pain, suffering in agony, I don't see a sick, ill patient trying to survive, I see a soul, a soul of endless opportunities, a soul exploding with ideas and worlds inside, I see a soul thriving, bent on making the impossible, possible, bent on letting go of fears and inhibition so that soul can carry that individual one step closer, ten steps further into immortality.

An illness is not a death sentence. An illness is a start of life sentence, it is when the heart is endangered, that the mind comes alive. It is when the body is aching, that the soul is waking.

Because that is not a miserable spirit I see, it is a spirit striving for completion, striving for an absolute in order to not become obsolete.

When a person is at his lowest, that's when he becomes his finest. It's then when he sees how high the sun rises, how wide the world stretches, how deep the will dives.

And when he falls, when his heart fails, when his mind turns down, I don't see his soul that was born to die, I see his soul that was born to love, born to hold and be held. His soul, that lifts the weight of his tears, that lifts the weight of the broken shards of his broken dreams, one day that soul will lift the weight of this world and the enormity of a single drop of water. And with it, my soul will rise in salute, in honor, in awe that one being can shake up the world in such strength even when his own hands and knees are shaking in fright.

And his passing, is not the passing of a patient or an occupier of a bed, or a number, his passing is the passing of a child, a man, a woman with hopes and dreams, desires and redemption, of solitude and flight. His passing is not the passing of a transient being, of a temporary replacement, his passing is a passing of a mighty deity, an unstoppable and unbreakable storm.

So while his body gives out and his heart and mind surrender to time, his soul slips through his fingers, wound in his thoughts and memories.

And when they ask me his condition, I turn around and tell them: Do not worry, he has claimed eternity for his own.



"Lone wolf, Belle Isle" by Beth Silvis

**Breakup Notes**

Michael Lisieski

Perhaps you cannot leap

and cannot bear

to say God's name.

Perhaps you imagine

an endless field

of blossoming alders

and yourself

a bare tree. Maybe

you will say the name

(*her* name) aloud,

re-taste the symmetric  
almost-sobbing syllables  
(*An-na, an-na*),  
sleep with nothing  
under your head.

Perhaps you will burn  
the letter you wrote

to your ex-husband.  
Perhaps you understand  
how something dies  
inside every mother

whether or not  
it's surgically removed.



"The Pequod Colon Gabriels Ship" by Moaz Sinan

On my first day as a Clinical Research Technician at Detroit Receiving Hospital, I was given a tour of the Emergency Department. When we arrived at the Resuscitation Room, I looked at the white ceiling, and I pondered the number of people for whom this was the last thing they ever saw. When we returned to our office, I scribbled down the following poem in my notebook:

**White Ceiling**

Connor Tukul

I look up and see the portrait of the unknown.

Patients turned to patrons,

Time stands still, I imagine.

Gazing into the whiteness,

Does it all make sense then?

When the banal becomes anything but,

When the noise fades and the light overwhelms,

The ultimate nexus approaches.

Looking back, looking forward – looking up,

Does it all make sense then?

I wonder.



"Female Skeleton" by Alex Diaczok



**Research: A Medical Student's  
Perspective**

Charlie Tsouvalas

Latex and lab coat failed

To hide me when the beast looked

At my manacle stare:

Pinned fast, held tight – squirming.

For the first time mouse knew

Latex was nature too,

But unnatural, cruel,

Perverse beast with its tool:

2 mm steel

Pushing past a tumor.

Thumb and forefinger pull

#1296.

But its life - a mere sham:

The glory of a row

In an Excel spreadsheet.

Electronic graveyard.

So no mercy comes from

This unmasking moment,

And yet I have to ask,

When does costume consume?

And while latex itches,

Lab coat clings and constricts,

My discomfort shows how

Each data takes its toll.

For the first time I knew

None from nature could do:

Lost humanity I share

With my maniacal stare.



"Individually Together" by Chaitali Anand

**When it rained for five minutes**

Seema Shah

"Crack!"

The red bangles of glass shatter all around

Ricocheting sunlight across the

the grey marble walls and on to the floor of the bathroom.

The other bangles remain on her delicate wrist,  
glistening through the golden studs of water.

Her *mangalsutra*\* hangs from her bare, slender neck.  
She is still a married woman.

Drops of rain gently beat upon the window,  
signaling the approaching darkness  
as it gently shrouds her mental universe in quietude.  
Her mental universe was big enough to harbor God  
Empty enough to let the quiet photons of enlightenment shine forth.

Her thumb and index finger were folded together  
in a meditative position.  
God lived in her thoughts even as the lights went precariously dim inside.

Sunlight gingerly comes forth through the window  
Shining light upon her fragile frame.

It was the last bucket of water to cleanse her,  
yet the beginning of a new journey.

It rained only for 5 minutes.

\**Mangalsutra*: A necklace worn by an Indian married woman.

**On the Finity of Time Spent with Friends, Family, and Loved Ones: I went to the Watchmaker**

Moaz Sinan

I went to the Watchmaker

to have him fix my watch.

I said to him,

It tells me that hours have passed,

what must surely be minutes

whenever I'm with Her.

Instead of breaking the watch open,

he grabbed me by the arm

and said,

Silly young man,

you're in Love.



Sunil Jaiman

**The invisible suffering (Homelessness)**

Radhika Rastogi

What do you see with your open eyes  
When your ears refuse to hear the cries  
When your smile is too empty to give  
The energy that he just needs to live.  
But your energy is shrouded by shoulders  
Too hunched up and boulders put up  
For any energy to emanate out  
And for the soundless ringing of a shout  
Of the silent sad faces and all the cold cases  
To ever reach you.



"Young Jordanian Surveys His City" by Michael Chrusciel

UNTITLED.

Gloria Jean

I plunged into the world below

barnacles reaching

darkness consuming

brushing my thigh

beauty unknown

the wreckage of past

sinking further into the abyss

hello

salt water chill

goodbye.

caressing my lips